

QUARTERLY PROGRESS REPORT
SAND POINT CLINIC REPLACEMENT PLANNING AND DESIGN
PROJECT NUMBER 0058-DC-2002-I11

PERIOD COVERED: October 1, 2002 – December 31, 2002

Project Phase: Planning

Percentage of Phase Completed:

	<u>Scheduled</u>	<u>Actual</u>
Planning	100%	100%
Design	0%	0%

Budget Status:

The project is on budget. See attached financial report for details.

Subcontracts Awarded This Period:

None

Activities:

The primary effort during this period was completion of the space program for the new clinic.

The initial draft of the space program resulted in a building of over 14,000 square feet. The City of Sand Point was concerned that the cost of constructing and maintaining a facility of that size would be more than the City could afford. The planner met with the City Manager and the EAT Executive Director and Clinical Director to discuss modifications to the space program. The result was a reduction in the final space program to 11,045 square feet.

The reduction in the space program was achieved primarily through the elimination of some of the programs to be accommodated in the new clinic. Sand Point is the administrative center for several of EAT's programs and it was these administrative services that were deleted from the program. Specifically, the Tribal Liaison, Business Office, and Travel Office will remain in a fully adequate building EAT now rents from the City of Sand Point. A copy of the overview of the Project Summary Document is attached. A copy of the full document is available upon request.

The estimated construction cost of the clinic based on the revised space program is \$4,142,000. Total project cost is estimated at \$5,546,100. The City of Sand Point has submitted an application for a CDBG grant to help fund its share of the cost and will be assisting the three local tribes apply for ICDBG grants this spring. Other potential sources of funds that are currently being explored are the Indian Health Service, USDA, and the Rasmuson Foundation.

The other major activity this period was the solicitation for design services and selection of a design team. The City of Sand Point published a Request for Statement of Qualifications in the Anchorage Daily News, with proposals due December 18th. The project steering committee met on December 20th to review the proposals. The steering committee consisted of the Sand Point City Administrator, the EAT Executive Director, and the Project Manager. The Denali Commission advisor assigned to this project observed the process.

Statements of Qualifications were submitted by eleven firms. After a thorough review and formal scoring process, the steering committee selected ECI/Hyer unanimously as their first choice. The City is currently negotiation with ECI/Hyer on the design fees and award of the contract is anticipated in January.

QUARTERLY FINANCIAL REPORT

Sand Point Clinic Replacement Planning and Design

PROJECT NUMBER 0058-DC-2002-I11

PERIOD COVERED: October 1, 2002 - December 31, 2002

	Quarter Ending 9/30/2002	Quarter Ending 12/31/2002	Quarter Ending 3/31/2003	Quarter Ending 6/30/2003
Total Project Budget	\$410,625	\$410,625		
Total Denali Commission Funding	\$410,625	\$410,625		
Total Project Expenditures by End of Quarter	\$0	\$27,253		
Total Denali Commission Fund Expenditures by End of Quarter	\$0	\$27,253		
Percentage of Total Expenditures to Total Budget	0.00%	6.64%		
Percentage of Denali Expenditures to Denali Budget	0.00%	6.64%		

Project Performance Analysis

For Period Ending 12/31/02

	Budget	Expenditures	Obligations	Work Performed	Amount Remaining
Planning/Site Studies	\$65,000	\$27,253	\$0	\$27,253	\$37,747
Design	\$300,000	\$0	\$0	\$0	\$300,000
Project Management	\$36,500	\$0	\$0	\$0	\$36,500
Indirect	\$9,125	\$0	\$0	\$0	\$9,125
Totals	\$410,625	\$27,253	\$0	\$27,253	\$383,372

Sand Point Clinic Project
PROJECT SUMMARY DOCUMENT
Overview

Project Background:

Sand Point was founded in 1898 by a fishing company; the first processing plant was constructed in 1946. What medical services were available during that period were provided by the fish processors or – for Alaskan Natives – community health aides. When the community incorporated as a city in 1966, health care became the responsibility of the City of Sand Point. The first dedicated clinic was constructed in 1984 by the City and was operated by the City for about five years before Aleutian Pribiloff Islands Association took over that responsibility. Shortly afterwards a regional health care organization was established specifically for the communities in this area. Eastern Aleutian Tribes serves seven communities on the Alaska Peninsula and the Aleutian Chain, including Sand Point.

Eastern Aleutian Tribes has expanded the health care services available in Sand Point to include mid-level providers, dental care, and mental health/substance abuse services. The existing clinic was not designed to accommodate these services and they have been located in separate facilities scattered around the community. This not only adds to the expense of providing services but interferes with the holistic approach to care that EAT prefers to practice.

Although EAT is a tribal health care organization it has always served the total population of Sand Point and the other communities. For the past few years EAT has received a Community Health Center grant to help defray the cost of services to the migrant fishermen and cannery workers who reside in Sand Point for several months out of the year. Everyone requiring care receives it, regardless of their ability to pay.

The City of Sand Point continues to support the provision of health care services by providing the clinic building at no cost to EAT and maintaining the facility with its own Maintenance Department. It retains the ultimate responsibility for health care services in Sand Point.

In the Spring of 2002, the City of Sand Point submitted an application to the Denali Commission for funding for replacement of the clinic. The Denali Commission funded the planning and design phases of the project. Funding of the construction phase will be dependent on successful completion of the planning and design phase and the ability of the City to provide a 50% match for the Denali Commission's funds.

Project Summary Document Overview Sand Point Clinic

The City of Sand Point has applied for a Community Development Block Grant to provide part of the required match. There are three Alaska Native Tribes in Sand Point and they have each agreed to request funding for the clinic through Indian Community Development Block Grants. In addition, the City is pursuing contributions from private and other public sources. Notification of the awards is expected by late summer in 2003.

Site Selection:

The City of Sand Point has been informally considering the issue of a site for a new clinic for several years. At a meeting of the City Council on 2/12/02 four specific sites were identified for further investigation. One was the existing clinic site and another was at the location of the old public works garage. Both of these sites are small and would require demolition of existing structures. The preferable sites were near the new post office. The City Council noted its first choice was a site above the post office, near the northwest corner of the intersection of the Sand Point Road and the Red Cove Road. It is part of a 12.5 acre subdivision, which would allow for future expansion, has utilities nearby, and is centrally located between the downtown area, the new housing area, and the airport.

The next step in the planning process was a professional evaluation of the preferred site. URS Corporation was retained to evaluate the soils, topography, and environmental impact aspects of the site. Utility and road access was identified; archeological or other obstacles to development were explored; and the adequacy of the site to accommodate the health center, with future expansion capability, plus other municipal structures was evaluated.

URS completed its study in September of 2002 and submitted a Site Investigation Report and survey. A site of 5.2 acres was identified and surveyed. The site was found to be adequate in size, with easily accessible utilities and good road access. No environmental or archeological obstacles to development were found. Soils were silty and will need to be replaced with structural fill. Bedrock was found two to five feet below the surface. The full report will be found in Section 5.

The land currently belongs to the Shumagin Corporation, the local Native corporation, and should be available under the ANCSA 14(c)(3) process for this purpose. The Shumagin Corporation has indicated it has no objections to this process. The City Administrator is currently pursuing transfer of the land.

Planning:

The City hired Planning for Health to prepare a space program for the new clinic. This task involved preparation of population and workload projections, interviewing clinic staff, and holding a public meeting to solicit community input.

Project Summary Document Overview
Sand Point Clinic

As of 2001, the resident population of Sand Point is estimated to be 952. In addition, another three hundred to five hundred cannery workers live in Sand Point throughout most of the year. The State Department of Labor projections for the population of the Aleutians East Borough (of which Sand Point is part) shows little if any growth over the next decade. The economy of the area depends largely on fishing and the future of that industry is uncertain. Sand Point is investigating the potential for other industries, including tourism.

For purposes of planning sufficient space in the clinic, a conservative approach was taken in projecting population and workload. The State's high population projections were used. This indicates a growth of up to 20% over the next decade. Although the percentage increase appears high, the actual number of residents will grow by less than 200. This will have little impact on the clinic's workload.

Sand Point
Projected Population Based on DOL High AEB Projections

	<u>2001</u>	<u>2005</u>	<u>2010</u>
Total Population	952	1030	1138
Native Population	403	436	482
Itinerant Population	500	500	500
Total Potential Users	1452	1530	1638

In the year 2000, there were 8049 visits to the Sand Point Clinic for medical care. By the year 2010, the number of visits is expected to grow to 9075, assuming the same rate of utilization prevails. This number is still within the capacity of two primary care providers. Currently the clinic has two mid-level practitioners and three health aides so no change in the core staff will be required.

In addition to primary care services EAT currently offers dental and behavioral health programs in Sand Point. However, due to the small size of the existing clinic these services are located in other facilities around the community. The new clinic will provide space to accommodate the dental and behavioral health programs.

EAT also operates several community health and administrative support programs in Sand Point. These are also located in a separate building from the clinic. Ideally these programs would be located at the new clinic, to consolidate all of EAT's operations at one location. However, these programs are currently housed in an adequate building at minimal cost. The programs serve all of EAT's facilities throughout the region and do not need to be co-located with the clinic. After much analysis and discussion it was decided that the Tribal Liaison, Facilities Management, Travel, and Business Office would not be re-located to the new clinic.

Project Summary Document Overview
Sand Point Clinic

Another issue that generated comment and discussion was the inclusion of an overnight stay room for ambulatory patients and /or staff. There was an initial desire to include two such rooms in the new clinic. However, in the interest of controlling the size of the facility it was decided that only one room would be provided and that the toilet and kitchen facilities would be shared with the staff lounge. Sand Point has a hotel and bed and breakfast facilities so housing for itinerant staff is readily available. The facility at the clinic will be used for ambulatory patients who need to be monitored and/or itinerant staff who are not able to find other accommodations in town.

The City of Sand Point provides the ambulance service currently. The ambulance is housed in a garage at the City Building. Since most of the emergency response team are city employees the current arrangement works well and the arrangement is expected to continue when the new clinic opens. An ambulance garage will be provided at the new clinic to ensure protection from the weather for patient transfers and to accommodate the ambulance if it is decided that it should be located at the clinic in the future.

Finally, provision will be made at the clinic for a morgue unit. Currently bodies are held in a cold storage unit of the local fish processing plant and that situation is considered less than ideal.

The following table lists the services to be provided at the new clinic and the current and projected staff who will provide those services.

	<u>Current Staff</u>	<u>Projected Staff</u>
Primary Care Services		
Mid-Level Practitioners	2	2
Community Health Aides	3	3
Urgent/Emergency Care Services		
Provided by Primary Care Staff		
Pharmacy Services		
Provided by Primary Care Staff		
Laboratory Services		
Provided by Primary Care Staff		
Diagnostic Imaging		
Provided by Primary Care Staff		
Dental Services		
Dentist	Itinerant	Itinerant
Dental Health Aide	0	1
Behavioral Health		
Clinicians	2	3
Village Based Counselors	2	2
Community Health		
Community Health Representatives	2	2

Project Summary Document Overview
Sand Point Clinic

Reception/Medical Records		
Receptionist	1	1
Information Technology		
Technicians	2	2
Maintenance		
Maintenance Technician	0	0.5
Housekeeping		
Housekeeper	0.5	0.5
Total Staff	14.5	17.0

The new clinic will provide an opportunity to expand the tele-health programs available to staff and patients. Digital x-ray images will be generated for transmission to an off-site radiologist for reading. Distribution of medications will be controlled electronically by an off-site pharmacist using automated drug dispensing equipment. Consultation with off-site physicians will be facilitated through video conferencing and the use of digital cameras and other digital applications.

A space program has been prepared to describe in detail the services to be provided in the new clinic, staffing and workload by department, operational concepts, adjacency requirements between departments, and a detailed listing of required spaces and their sizes. This space program will be found in Section 3. The following is a summary of the space requirements.

<u>Department</u>	<u>Department Gross Square Feet</u>
Primary Care	1540
Urgent/Emergency Care	1105
Pharmacy	275
Dental	695
Laboratory	205
Diagnostic Imaging	305
Behavioral Health	1190
Community Health Representatives	300
Reception/Medical Records	300
Information Services	630
Shared Facilities	850
Public Facilities	540
Support Areas	<u>770</u>
Sub-total:	8705
Floor Gross Area (Sub-total x 1.2):	10,445
Mechanical Areas:	600
Total Building Area:	11,045

Project Summary Document Overview
Sand Point Clinic

Project Budget and Schedule:

The budget for the Sand Point Clinic is based on recent experience with the construction of a similar facility in King Cove. The construction cost for that facility was approximately \$337 per square foot in 2001. Inflation is currently estimated at 3.5% annually. With construction of the Sand Point Clinic scheduled for 2004 the cost per square foot should be about \$375, for a total construction cost of \$4,142,000.

In addition to construction, the project budget includes the planning and design costs, equipment, furnishings, construction administration, and a contingency fund. Total project costs for the Sand Point Clinic are estimated at \$5,546,100.

The schedule for this project recognizes that funding of the construction phase may not be finalized until late in 2003. Design should be complete at that point so that the project can be bid in the winter. Construction could then begin in the spring of 2004, with completion requiring about a year. A detailed schedule follows:

Proposed Project Schedule

Conceptual Design	February 17 – March 31, 2003
Conceptual Design Review	March 31 – April 14, 2003
Schematic Design	April 14 – June 2, 2003
Design Review	June 2 – June 16, 2003
Design Development	June 16 – August 11, 2003
Design Review	August 11 – August 25, 2003
Construction Documents – 95%	August 25 – October 27, 2003
Documents Review	October 27 – November 17, 2003
Final Documents	November 17 – December 1, 2003
Advertise for Bids	January 5 – February 2, 2004
Review Bids and Award Contract	February 2 – February 16, 2004
Construction	March 1, 2004 – March 1, 2005
Project Closeout	March 1 – May 1, 2005